

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

2010 MAY 17 AM 9:05

COMMITTEE NAME (Must be same as on Statement of Organization)

patshey.com

IMPORTANT: Indicate by # type of committee you are reporting for: 6
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name
Pat Shey

Political Party (if applicable)
n/a

Office Sought
City Council

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____
Logged In _____
Scanned _____
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A 12-1-09

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED 12-1-09 11:26:09

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

12-01-09

County & Local Committees, enter County in which Election is held

Linn

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 5,257.83

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

7,950.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 13,207.83

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

10,855.67

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 2,352.16

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 4,520.64

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 0.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

patshey.com

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
11/22	ID# CK#	JIM BRADLEY 2007 1ST AVE SE CL		\$100.	<input type="checkbox"/>
11/22	ID# CK#	KEVIN KNUTSON 1574 TURKEY CT N.W. SWISHER IA 52338		250.	<input type="checkbox"/>
11/22	ID# CK#	D.J. SHEY 2303 HWY 169 ALBONA IA 50511	FATHER	2000.	<input type="checkbox"/>
11/22	ID# CK# 6323	MASTER BUILDERS 221 PARK ST. DES MOINES 50306-		750	<input type="checkbox"/>
11/22	ID# CK#	KIM & KATHERINE BROKAN 2244 GRANDE CL 52403		400.	<input type="checkbox"/>
11/22	ID# CK#	JAY OSBURN CARLA SHEY OSBURN 510 EDINBURGH, MARION	SISTER	100	<input type="checkbox"/>
11/22	ID# CK#	KAY HALLORAN 825 17TH ST. SE CL 52403		500	<input type="checkbox"/>
11/22	ID# CK#	1203 RUSH 900 2ND ST. SE #605 CL 52401		150	<input type="checkbox"/>
11/22	ID# CK#	JOHN & CINDY BLUOMHALL 27 HAGGIS WAY MARION IA 52302		250	<input type="checkbox"/>
11/22	ID# CK#	WILL PROWELL 523 KNOLLWOOD SE CL 52403		200	<input type="checkbox"/>

SUB-TOTAL

\$4700

TOTAL (If last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

ptfkey.com

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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✓ 11/22	ID# CK#	BOB & DIANE JOHNSON 416 JACOLYN DRIVE NW CR 52402		\$ 50.	<input type="checkbox"/>
✓ 11/22	ID# CK#	STEVE CARFRAE 2633 WHITNEY NE CR 52402		50.	<input type="checkbox"/>
✓ 11/22	ID# CK#	JOHN SMITH 315 ROSEDALE CR 52403		500.	<input type="checkbox"/>
✓ 11/22	ID# CK#	BARRY BUYER 7100 GREEN BRANCH LN CR 52411		50	<input type="checkbox"/>
✓ 11/22	ID# CK#	HENRY & ANN ROYER 330 ROSEDALE CR 52403		200	<input type="checkbox"/>
✓ 11/22	ID# CK#	LARRY HELLING 2910 NEWCASTLE MARION 52302		100	<input type="checkbox"/>
✓ 11/22	ID# CK#	JEFF & TERRI ELGIN 6940 BOYMAN LN NE CR 52402		250	<input type="checkbox"/>
✓ 11/22	ID# CK#	TOM ALLEN 1089 CERRA WOODS RD CR 52402		250	<input type="checkbox"/>
✓ 11/22	ID# CK#	GEO. GRASK P.O. BOX 67 CR 52406		200	<input type="checkbox"/>
✓ 11/22	ID# CK#	GERALD & BARRA ECKHART 295 30TH ST. SE CR 52407		100	<input type="checkbox"/>

SUB-TOTAL

\$1750

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

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Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

pc foley.ca

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(8), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
11/22	ID# CK#	CLEO EDWARDS 1225 THIRD AVE SE IN 52403		\$ 150	<input type="checkbox"/>
11/22	ID# CK#	JIM & JEAN TINKER 2304 HILLCREST SE IN 52403		100	<input type="checkbox"/>
11/22	ID# CK#	JOE & KATHY POTTEN 4847 OAK GROVE CT NE IN 52401-6789		500	<input type="checkbox"/>
11/22	ID# CK#	TONY COLOMBO 740 27TH ST DR SE IN 52403		100	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (If last page of this schedule)

\$ 850

\$

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(for Schedule A)

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☒ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Datshey.com

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
	ID# CK#			\$	
	ID# CK#				
	ID# CK#				
11/3	ID# CK#	KELLY BAIER CEDAR RAPIDS		100	
11/3	ID# CK#	SCOTT & LAIL NAU CEDAR RAPIDS		50	
11/3	ID# CK#	GORDON EPPING CEDAR RAPIDS		100	
11/3	ID# CK#	WAYNE ENGLE MARION		100	
11/3	ID# CK#	KAY HALBORN CEDAR RAPIDS		100	
11/3	ID# CK#	DAN THIES CEDAR RAPIDS		100	
11/3	ID# CK#	SARAH SHEV BROOKLYN, NY	SISTER	100	

SUB-TOTAL

TOTAL (If last page of this schedule)

\$ 650.

\$ 7950

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Petskey.ca

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-11	ID# CK# 5046	US POST OFFICE CR	STAMPS	\$ 88.00
11-11	ID# CK# 5047	US POST OFFICE CR	POSTAGE	668.00
11-13	ID# CK# 5048	LINN COUNTY AUDITOR CR	LISTS	30.00
11-13	ID# CK# 5049	COPY SHOP CR	POST CARDS	123.69
11-23	ID# CK# 5050	ON MEDIA CR	CABLE	1605.00
11-23	ID# CK# 5051	KCRG CR	TV	1525.75
11-23	ID# CK# 5052	ALLEGRA CR	PRINTING & POSTAGE	2312.27
11-24	ID# CK# 5053	KMY CR	RADIO	600.
SUB-TOTAL				\$ 6952.71
TOTAL (If last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

patskey.com

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-27	ID# CK# 5054	OFFICE MRP CA	OFFICE SUPPLIES	\$ 48.96
10-29	ID# CK# 5044	KCRG-TV	TV	2746.00
	ID# CK#			
	ID# CK#			
10-20	ID# CK# 5045	KMR	RADIO	1108.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 3902.96

TOTAL (if last page of this schedule) \$ 10855.67

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)